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Approved for use through 10/31/2002. OMB 0651-0032

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UTILITY							
PATENT APPLICATION							
TRANSMITTAL							

7784-000107/DVA Attorney Docket No. Blackmon et al. First Inventor COMPOSITE BACKED PRESTRESSED MIRROR FOR SOLAR

- 2	IRAN	SIVII I A	\L	Title FACET					
(Only for ne	w nonprovisional	applications und	er 37 C.F.R. 1.53(b))	Expre	ss Mail Label No.	EL741094151	US		D,
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.					ADDRESS TO	O: Commis P.O. Bo	p Patent Applica ssioner for Patent x 1450 Iria, VA 22313-14	is i	<u> </u>
1. Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing) 2. Applicant claims small entity status. See 37 CFR 1.27. 3. Specification [Total Pages of Institute of the Invention of Institute of the Invention of Institute of the Invention of Institute				on glish	Computer 8. Nucleotide and (if applicable, a a. Computer b. Specification i. CD-RON ii. paper c. Statemen ACCON 9. Assignm 0. 37 C.F.F. (when the context of the context	Program (Apple) for Amino Acid necessary) r Readable For Sequence List or CD-R (2) ts verifying id IPANYING Ament Papers (6 R.§3.73(b) Statere is an ass Translation D	d Sequence Signary (CRF) sting on: copies); or entity of above PPLICATIONS cover sheet & cutement ignee)	copies PARTS document(s)) Power of Attorney	10/6
5. Oath or [a.	Newly execute Copy from a pr (for a continual) DELETION (Signed statemer named in the pri 1.63(d)(2) and 1 blication Data Si	d (original or color application tion/divisional of the INVENTO at attached delettor application, so .33(b).	(37 CFR 1.63 (d)) with Box 18 complete DR(S) ing inventor(s) ee 37 CFR CFR 1.76	Statement (IDS)/PTO-1449 Citations 13. Preliminary Amendment 14. Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15. Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. Request and Non Publication under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 17. Other:					
or in an App Conti Prior app For CONTIN	18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: ☐ Continuation ☑ Divisional ☐ Continuation-in-part (CIP) of prior application No: 09/ / 604.224 Prior application information: Examiner Ricky D. Shafer								
			17. CORRES	PONDE	NCE ADDRESS				
☑ Custor	mer Number or Ba	r Code Label	(Insert Customer No.	757 or Attacl		or 🗖	Corresponden	ce address below	<i>'</i>
Name Harness, Dickey & Pierce, P.L.C.									
Address	P.O. Box 828								
City	Bloomfield Hills State			I N	<u> </u>	Zip Code	48303		
Country	United States		Telephone		248-641-1600 Fax 248-641-0270				
Name (Pi	rint/Type)	Michael D. Z	alobsky	Re	egistration No. (At	torney/Agent)	45,512		$\overline{}$
Signature			ZZ	<u> </u>	Date	August 2	27, 2003		

PTO/SB/17 (01-03)

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FFF TO A NOMITTAL	Complete if Known				
FEE TRANSMITTAL	Application Number	N/A			
for FY 2003	Filing Date	N/A			
	First Named Inventor	Blackmon et al.			
Patent fees are subject to annual revision.	Examiner Name	N/A			
☐ Applicant claims small entity status. See 37 CFR 1.27	Group / Art Unit	N/A			
TOTAL AMOUNT OF PAYMENT (\$) 750	Attorney Docket No	7784-000107/DVA			

METHOD OF PAYMENT (check all that apply)				FEE CALCULATION (continued)				
				3. ADDITIONAL FEES				
☐ Check ☐ Credit card ☐ Money ☐ Other ☐ None Order				Entity	Small I	<u>Entity</u>		
Deposit Account:			Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
Deposit Account 08-0750		1051	130	2051	65	Surcharge - late filing fee or oath		
			1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet.	
Deposit			1053	130	1053	130	Non-English specification	
Account Hamess, Dickey & Pierce, P.L.C.			1812	2,520	1812	2,520	For filing a request for reexamination	
	ner is autho	rized to: (check all that apply)	1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
🛛 Charge any a	dditional fee	elow Credit any overpayments (s) during the pendency of this application	1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
to the above-ide		elow, except for the filing fee	1251	110	2251	55	Extension for reply within first month	
to the above-lue		E CALCULATION	1252	410	2252	205	Extension for reply within second month	
BASIC F	LING FEE		1253	930	2253	465	Extension for reply within third month	
Large Entity Fee Fee	Small Entity		1254	1,450	2254	725	Extension for reply within fourth month	
Code (\$)	Code (\$)	Fee Description Fee Paid	1255	1,970	2255	985	Extension for reply within fifth month	
1001 750	2001 375	Utility filing fee 750	1401	320	2401	160	Notice of Appeal	
1002 330	2002 165	Design filing fee	1402	320	2402	160	Filing a brief in support of an appeal	
1003 520	2003 260	Plant filing fee	1403	280	2403	140	Request for oral hearing	
1004 750 1005 160	2004 375 2005 80	Reissue filing fee Provisional filling fee	1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1003 100 1	2005 60	Provisional minig tee	1452	110	2452	55	Petition to revive - unavoidable	
SUBTOTAL (1) (\$) 750				1,300	2453	650	Petition to revive - unintentional	
O EVERACIAL	METEC		1501	1,300	2501	650	Utility issue fee (or reissue)	
2. EXTRA CLA	M LEE2	Extra Fee from Fee	1502	470	2502	235	Design issue fee	
		Claims below Paid	1503	630	2503	315	Plant issue fee	
Total Claims 1	-20 **	= 0 X = 0	1460	130	1460	130	Petitions to the Commissioner	
Independent	-3 **	= 0 X = 0	1807	50	1807	50	Processing fee under 37 CFR 1.17 (q))
Claims 3 Multiple			1806	180	1806	180	Submission of Information Disclosure Stmt	
Dependent Large Entity	ı Small E	X = 0	8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
Fee Fee Code (\$)	Fee Code	Fee (\$) Fee Description	1809	750	2809	375	Filing a submission after final rejection (37 CFR § 1.129(a))	ור
1202 18	2202	9 Claims in excess of 20	1810	750	2810	375	For each additional invention to be	
1201 84	2201	42 Independent claims in excess of 3	l				examined (37 CFR § 1.129(b))	
1203 280	2203	140 Multiple dependent claim, if not paid	1801	750	2801	375	Request for Continued Examination (RCE)	
1204 84	2204	42 ** Reissue independent claims over original patent	1802	900	1802	900	Request for expedited examination	
1205 18	Ì				of a design application			
over original patent				ee (speci	fy)	-		
SUBTOTAL (2) (\$) 0				*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 0				
**or number previously paid, if greater; For Reissues, see above							(4) 0	
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1	SUBMITTED BY		Complete (if applicable)			
l	Name (Print/Type)	Michael D. Zalobsky	Registration No. Attorney/Agent)	45,512	Telephone	248-641-1600
	Signature		3300		Date	August 27, 2003